Membership Name:			Pass #:		
		2008 MEME	BERSHIP FO	<u>ORM</u>	
admissions &	embership a great monetary deal, it he gift shop sales are our main source of ring as an important resource for resid	operational funds. Thes	se sales, combined wi	th approved grant fund	facility. As a non-profit facility, our ding, allow the Maine State Aquarium to
1. Date: _ If purchasing	/ 2 0 0 8 membership as a gift, please include yo	2. Check One: ur name & phone numbe	New Member er here:	Past Member_	Gift Membership
Name:			Phone::		$_$ Send to Me \square Send to Recipient \square
<u>Membersh</u>	<u>ip Benefits include:</u>				
	Unlimited season visits		→ A 10% g	ift shop discount	
	The Tidepool Times newslette		- A bumpe		
	Free admission to Summer Sci	ence Programs	→ 4 Guest	Passes (Family Membe	ership only)
The follow	ing membership guidelines ap	<u>ply</u> :			
	Pass must be present to be used	l and one member must i	have corresponding id	entification.	
	Members must sign-in to each t	ime they are using pass.			
	Family Pass member names wi	ll be listed on membersh	ip form and must have	same family name.	
	Passes are limited to one perso	n (Individual Pass) or 8 i	immediate family men	nbers (Family Pass) onl	y.
	No businesses will be allowed treservation.	o purchase Family Passe.	s. General admission f	ares will be charged or	group rate (10 or more people) with pro
	Passes are good for current sea	son only, are non-refund	lable and non-transfer	able.	
	Family Pass members will rece with collect. If unused, passes w	ive 4 guest passes to be u vill expire at end of seaso	used during current sed on.	ason. When used, passe	s will be hole-punched and receptionist
*Individual m ** Family mei	rship Type (check one) INDIV nembership will cover one person. mbership will cover up to 8 immediate f il membership will have the same benefi	amily members to includ	le 4 adults and up to 4	unmarried children or	grandchildren under 16 yrs old.
4. Name on Pass			Telephone #		
Addres	s:				
					Zip
	amily Pass Members: Immediat				
Name				Age (Check: Adult 🗆 Child 🗆
Name				Age (Check: Adult 🗆 Child 🗆
Name				Age(Check: Adult 🗆 Child 🗆
Name				Age(Check: Child \square
Name				Age(Check: Child \square
Name				Age(Check: Child \square
Name				Age(Check: Child
6. Do you	wish to add a donation to your	membership? YES	S 🗆 NO 🗆 I	f so, how much? \$	(add to total)
7. Paymer	nt Method: Check \square (Check	#) Credi	t Card 🗆 Cash 🛭	Total: \$
Name o	n Card (as it appears)				Type: Visa 🗆 MC 🗆
Credit C	ard Information (if sending) #				Exp/_
	re of Purchasing Member:				
- 3					r